

2002

Wisconsin Composite Estimated Tax Voucher

Form **CN-ES**

For Nonresident Athletes, Directors, Partners, or Shareholders
Using Form 1CNA, 1CND, 1CNP, or 1CNS for Calendar Year 2002

Federal Employer Identification Number		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #1

Due Date: April 15, 2002

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:

Wisconsin Department of Revenue
P.O. Box 8912
Madison, WI 53708-8912

DC-046

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Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #2

Due Date: June 17, 2002

AMOUNT OF PAYMENT

\$

Please do not staple your payment to this voucher.

Make your check payable to and mail to:

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Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #3

Due Date: September 16, 2002

AMOUNT OF PAYMENT

\$

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Federal Employer Identification Number		
<div></div>		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #4

Due Date: January 16, 2003

AMOUNT OF PAYMENT

\$

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Federal Employer Identification Number		
<div></div>		
Name of Corporation, Partnership, or Tax-Option (S) Corporation		
Street Address		
City	State	Zip Code

VOUCHER #5 – EXTENSION PAYMENT

Due Date: April 15, 2003

AMOUNT OF PAYMENT

\$

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P.O. Box 8912
Madison, WI 53708-8912

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